

CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8)

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being submitted by First Class mail to the US Patent and Trademark Office: Commissioner for Patents, PO Box 1450, Alexandria, VA 22313-1450 or transmitted by facsimile to the U.S. Patent and Trademark Office, Fax No. (571) 273-8300.

Date:

9/22/06

By:

Patti Hespell

Mail Stop RCE

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re: Patent Application of Charles A. Eldering

Conf. No.: 8882 : Group Art Unit: 2623
Appln. No.: 09/712,790 : Examiner: Sheleheda, James R.
Filing Date: 14 November 2000 : Attorney Docket No.: T721-10

Title: Queue Based Advertisement Scheduling And Sales

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AFTER FINAL REQUEST FOR CONTINUED EXAMINATION UNDER 37.C.F.R.1.114

This is a request under 37 CFR 1.114 for continued examination (RCE) of the above identified application in response to the Final Office Action dated May 31, 2006 Enclosed are the following in support of the RCE under C.F.R. 1.114:

- ☐ Enter the unentered Amendment previously filed on _____ under 37 C.F.R. 1.11 in the above application.
- ☒ An Amendment/Request for Reconsideration.
- ☒ An Information Disclosure Statement, PTO/SB/08A, and cited references.
- ☒ A Petition for Extension of Time to and including October 2, 2006, (September 30 and October 1, 2006, being a Saturday and Sunday) for the pending application.
- ☐ Other: _____

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Application No. 09/712,790

The following fees are enclosed:

☒ RCE fee of \$790.00 required under 37 C.F.R. 1.17(e)

☒ Additional claim fees of \$50.00 for excess claims submitted in the enclosed Amendment, calculated as follows:

					SMALL ENTITY		LARGE ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDIT. FEE	RATE	ADDIT. FEE
TOTAL	60	(-)	59	1	x 25		x 50	50.00
INDEP.	4	(-)	4	0	x100		x200	
[] 1 st PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					+\$140		+\$280	
					TOTAL		TOTAL	50.00

☒ The Commissioner is hereby authorized to charge and/or credit Deposit Account No. **501535** as noted below. A duplicate of this sheet is enclosed.

☒ Any overpayments or deficiencies in the above calculated fee(s).

☒ RCE fee in the amount of \$790.00.

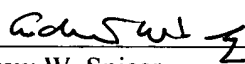
☒ Additional claim fees in the amount of \$50.00 as calculated above.

☒ Any additional fees required under 37 C.F.R. §§ 1.16 or 1.17.

CORRESPONDENCE ADDRESS

Date:

9/22/06


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